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Substitute for form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet ONE of ONE

Complete if Known	
Application Number	09/688 997
Filing Date	16 OCT 2000
First Named Inventor	GIACCHERINI
Art Unit	2132
Examiner Name	
Attorney Docket Number	HMD2000-1-CIPA

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Date Considered

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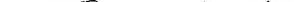
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